Date Received 6/25/75 Application No. [illegible]

T. C. No.

Map Date

MECKLENBURG COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

APPLICATION FOR WELL WATER SUPPLY PERMIT

NAME OF OWNER Klutts Realty & Construction Co., Inc.
(LAST FIRST MIDDLE)

ADDRESS OF OWNER 1433 Emerywood Drive, Charlotte, NC ZIP 28210

PHONE NO. Home 525-2864 Office Same

LOCATION OF PROPERTY 2519 Matthews - Mint Hill Road
(STREET OR COUNTY RADS)

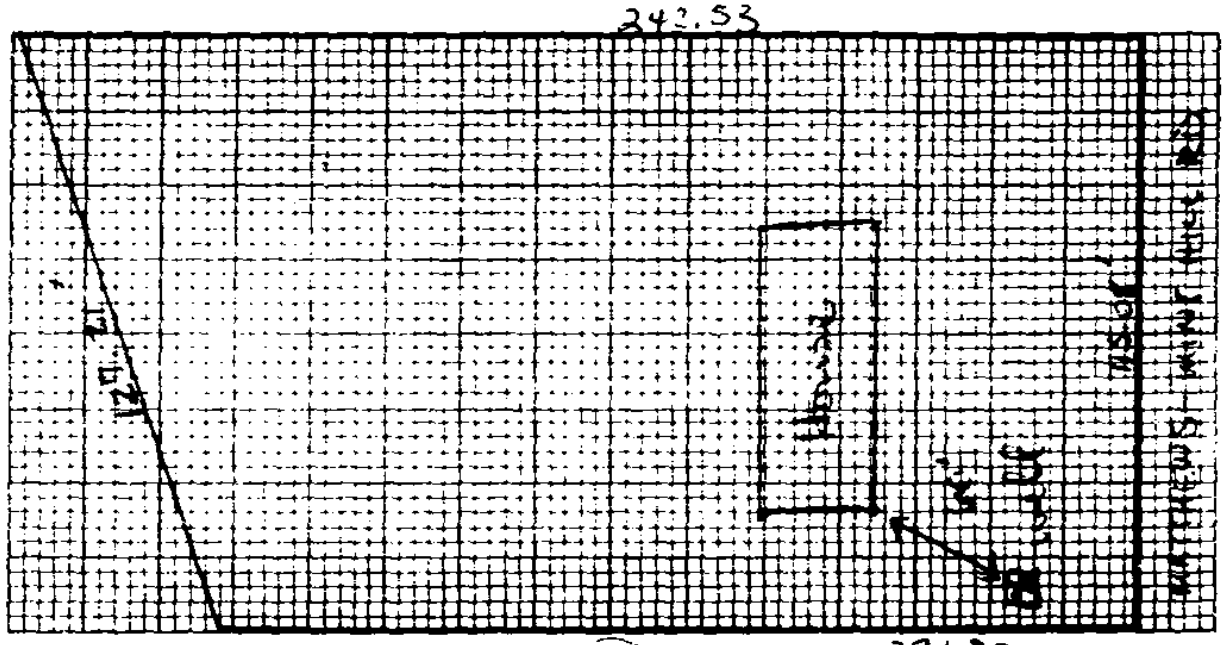
SUBDIVISION Wood Hollow LOT NO. 1 BLOCK NO. 1

MAP BOOK NO. 17 PAGE NO. 71

DEED REFERENCE: DEED BOOK PAGE NO.

WELL CONTRACTOR Crawford Well Drilling LICENSE NO.

Application is hereby made to the Mecklenburg County Health Department for a permit to drill a water well on the hereinabove described lot to be used as a source of X individual, _____ semi public, or _____ public water supply:



ACCURATELY DIAGRAM & DIMENSION LOT

June 23, 1975
DATE OF APPLICATION

OWNER Vice-President

Application approved and permit hereby granted

Permit No: 91-54

ENVIRONMENTALIST

FORM NO. E-28-8-1-72

HEALTH DEPARTMENT'S COPY

T. C. No.

MECKLENBURG COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

WELL RECORD

Drilling Contractor Crawford Well Drilling Reg. No 279 Well Permit No. 9204

1. Town Matthews (Wood Hollow) County Mack
2. Location 2519 Matthews-Mint Hill Rd. Lot 1 Blk 1 Quadrangle No
   Show a sketch of location on back of form
3. Owner Klutts Realty & Const. Co., Inc.
   Address 1433 Emerywood Dr. Char. N. C. 28210
4. Topography draw, slope hilltop, valley, flat
5. Use of Well Domestic Date Completed
6. Rig type or method Air Rotary Total Depth
7. Casing: Depth Diam. Type
   From 0 to ft. in.
8. Grout: Depth Material Method
   From to ft. in.
9. Screen: Depth Diam. Type and Opening
   From to ft. in.
10. Water Zones (depth)
11. Static Water Level: ft above / below top of casing
    which is ft above land surface. Elev
    Date 8/27/75
12. Yield (gpm) Method of testing Air
13. Pumping Water Level: ft. after 8 hrs.
    at 10 gpm.
14. Water Quality Temperature (°F)
15. Well sterilization method HTH 1 Cup
16. Permanent Pump: Type Make
    Installed — Date 8/29/75 By Crawford
    Capacity (gpm) Hp.
    Intake depth Airline depth
17. Remarks:

I do hereby certify that this well record is true and exact.

Buddy M. Crawford
SIGNATURE OF CONTRACTOR OR AGENT

DRILLING LOG

Depth From	Depth To	Formation
0		

FORM NO. E-22-9-1-72

SOIL INVESTIGATION REPORT

Date of Investigation July 16, 1975 APT NO. 9684

Owner Hutts Reality & Construction Co., Inc.

Location of Property ~~1433 Forest Wood Drive~~ Lot No. 2 Block I
2511 Mathews Mint Hill Rd TCN 143 - 332 - 06

Soil Suitability Ratings

Soil Properties	Soil 1	Soil 2	Soil 3	Soil 4
1. Soil Series	Cecil			
2. Soil Slope	Suitable 2-4%			
3. Soil Depth	Suitable >48"			
4. Soil Texture	marginal clayey			
5. Soil Structure	marginal subK			
6. Restrictive Horizons	N.A.			
7. Soil Drainage	Suitable W.T. >6'			
8. Soil Permeability (Percolation Rate)	marginal 60min/in			
9. Other	N.A.			
10. Overall Rating	marginal			

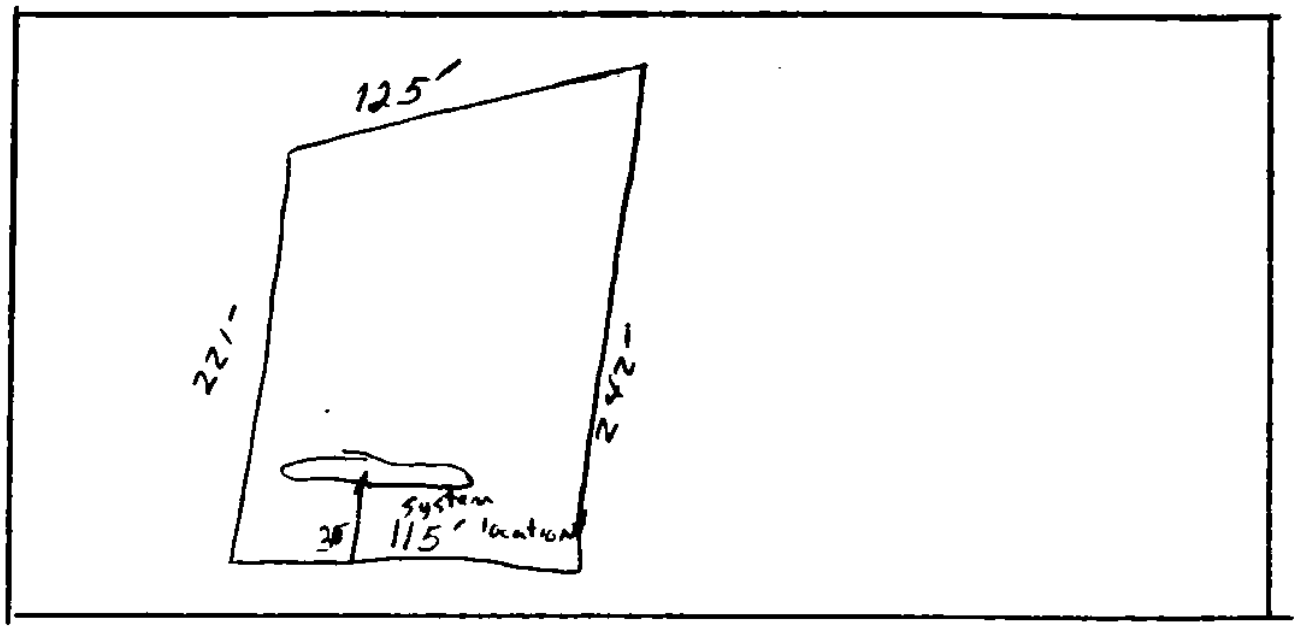
Recommendations Based on this investigation, the lot is recommended for approval for installation of a septic tank system. System design should be based on a percolation rate of 60 min/in.

See diagram on back

W. Edward Casavant
Soil Scientist

3/18/75
HMD 539

DIAGRAM OF PROPERTY



3/18/75

END 539

Date Received 7/11/75 APT No. 9684

T. C. No.

Map Date

MECKLENBURG COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

APPLICATION FOR PERCOLATION TEST

1) NAME OF OWNER Klutts Realty & Construction Co., Inc.
(LAST, FIRST, MIDDLE)

2) ADDRESS OF OWNER 1433 Emerywood Drive, Charlotte, NC ZIP 28210

3) PHONE NO. Home 525-2864 Office Same

4) LOCATION OF PROPERTY 2519 Matthews-Mint Hill Road
(STREET OR COUNTY ROAD)

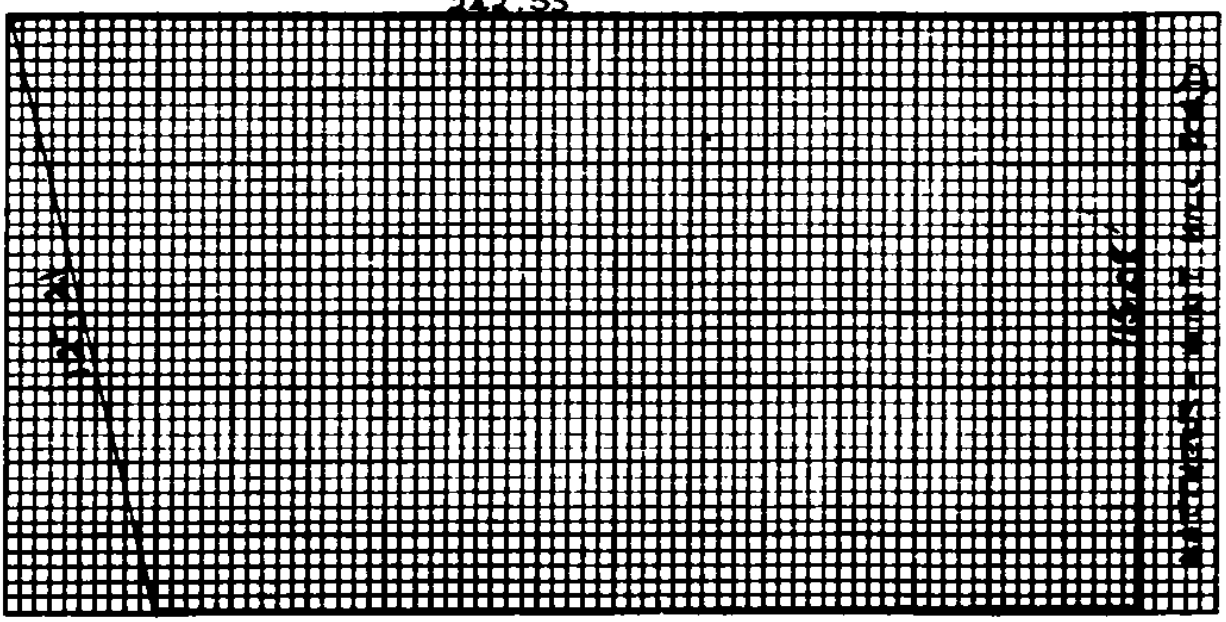
5) SUBDIVISION Wood Hollow LOT NO. 1 BLOCK NO. 1

MAP BOOK NO 17 PAGE NO. 71

6) DEED REFERENCE: DEED BOOK PAGE NO.

Application is hereby made to the Mecklenburg County Health Department for the conduct of a percolation test and an on site inspection of the lot hereinabove described for the purpose of determining if the lot is suitable for the installation of an individual septic tank wastewater treatment system with subsurface, soil absorption, effluent discharge.

242.53'



7) ACCURATELY DIAGRAM & DIMENSION LOT 221.92

Charles L. Beam Jr.
OWNER
Vice-President

FORM NO. E-1-0-1-72

HEALTH DEPARTMENT'S COPY

Serial No. 5463

PTR No. 9684

Date Issued 7-16-75

T C No 193-332-06

Map Date

Do Not Issue A Building Permit Based On This Form

MECKLENBURG COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

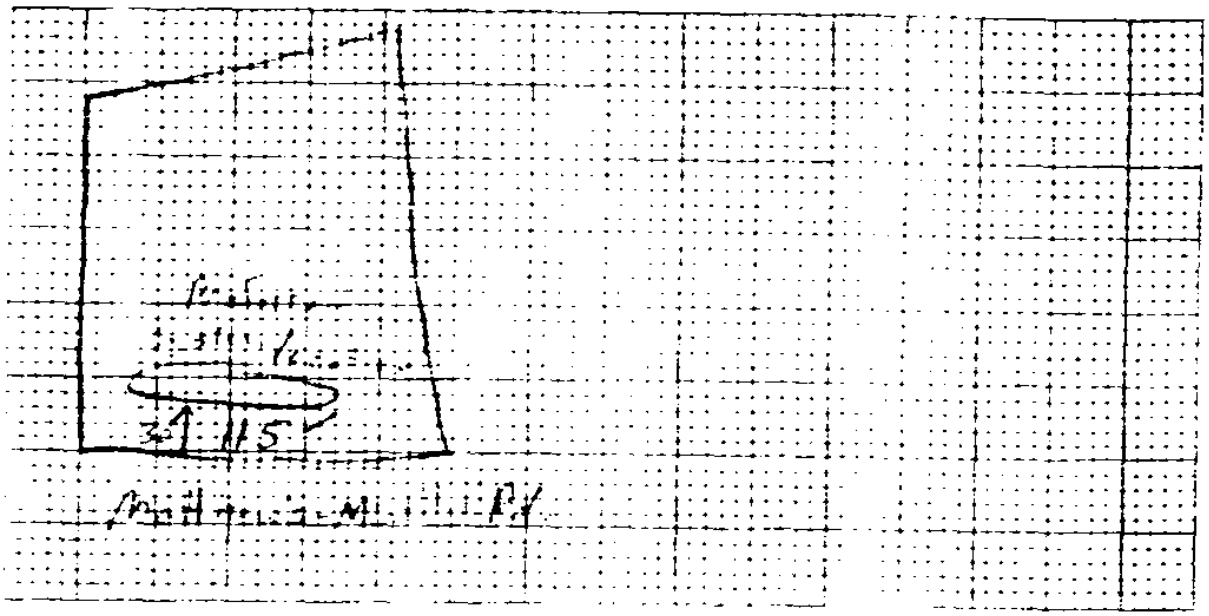
PERCOLATION TEST REPORT

NAME OF OWNER Klutts Realty & Construction Co.,Inc.
(LAST, FIRST, MIDDLE)

ADDRESS OF OWNER 1433 Emerywood Drive, Charlotte,NC ZIP 28210

LOCATION OF PROPERTY 2511 Matthews-Mint Hill Rd.
(STREET OR COUNTY ROAD)

SUBDIVISION Wood Hollow LOT NO 2 BLOCK NO 1



PLOT PLAN

This is to certify that a percolation test has been run and an on-site inspection made by the Mecklenburg County Health Department on the lot described above. The said test was conducted on that portion of the lot as indicated on above plot.

The percolation rate determined by the test was *60min/in. The site is approved for the installation of an individual septic tank wastewater treatment system with subsurface soil absorption effluent discharge subject to the following terms and conditions:

1. A permit to install, construct, alter, or repair the specified system shall be obtained from the Mecklenburg County Health Department prior to the beginning of any construction of buildings on the wastewater treatment system on the subject lot.
2. The size of the septic tank wastewater treatment system which must be installed will be determined by the Health Department prior to installation based on the percolation rate obtained above, and on the size and type of building constructed thereon.
3. This approval is valid only if the system is installed in the immediate area where the percolation test was run.
4. This approval is void if any grading, filling, or construction, including the drilling of wells, is performed on the lot which, in the opinion of the Health Department renders the area where the percolation test was run unsuitable for the installation, construction, alteration, and/or repair of such a system.

This approval is granted based on the laws of the State of North Carolina and the rules and regulations of the North Carolina State Board of Health and the Mecklenburg County Board of Health which were in effect on the date of issuance and is void if at any time in the future, prior to the completion of the system, these laws, rules, and regulations are changed such that this approval would not have been granted had the new or revised laws, rules, and regulations been in effect on the issue date.

* Results determined by soil analysis.

W. Edward Caywood
Soil Scientist

John R. Atkinson
Director, Environmental Health Division or Authorized Section Head

FORM NO. E-2-9-1-72

HEALTH DEPARTMENT'S COPY

Date Received 7/11/75

ICAR(S) Application No 96844

T C No

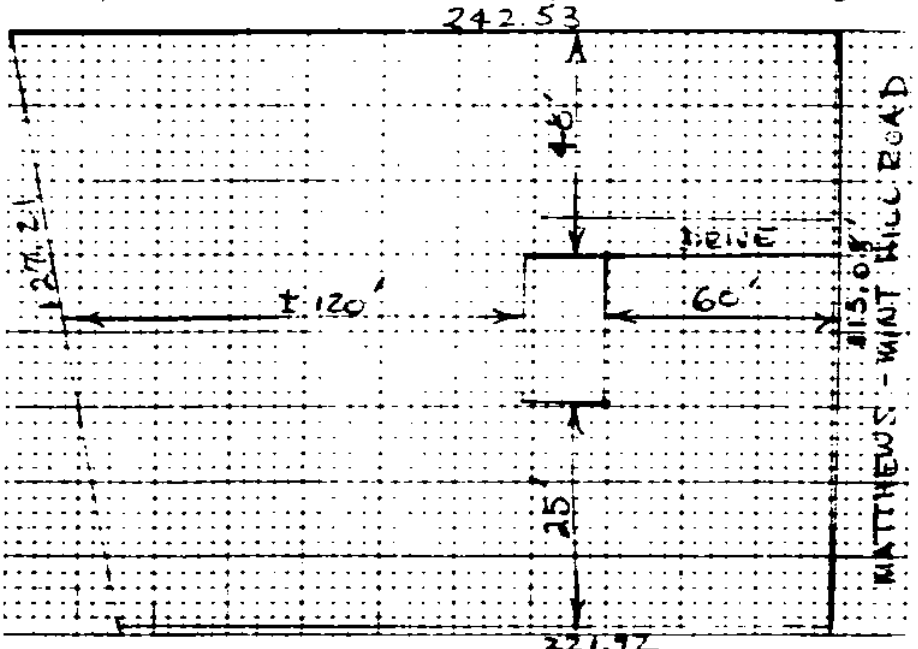
Map Date

MECKLENBURG COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION

Application for an
Installation, Construction, Alteration, and/or Repair Permit
(Individual Septic Tank System with Subsurface, Soil Absorption, Effluent Discharge)

The owner of that property described hereinafter hereby applies to the Mecklenburg County Health Department for a permit to

(X) Install or Construct ( ) Alter or Repair an individual septic tank wastewater treatment system with a subsurface soil absorption, effluent discharge



3) PLOT PLAN (ACCURATELY DIMENSIONED)

4) No. of Bedrooms 3

5) Building Use ( ) Yes ( ) No
Employees

6) Washing Machine (X) Yes ( ) No

7) Garbage Disposal ( ) Yes (X) No

8) Dishwasher (X) Yes ( ) No

9) Water Supply
A Individual Supply (X)
B Community System ( )
C Municipal System ( )
Well ( )
Spring ( )
Cistern ( )
Shallow System
Deep System ( ) Yes (X) No
Community System ( ) Yes (X) No

11) FHA Case No. N/A

12) VA Case No. UNKNOWN

13) NAME OF OWNER Klutts (LAST) Realty & Construction (FIRST) Co., Inc. (MIDDLE)

14) ADDRESS OF OWNER 1433 Emerywood Drive, Charlotte, NC 28210

15) PHONE NO Home 525-2864 Office Same

16) LOCATION OF SYSTEM 2519 Matthews - Mint Hill Road (STREET OR COUNTY ROAD)

17) SUBDIVISION Wood Hollow Lot No 1 Block No 1

Map Book No 17 Page No. 71

18) DEED REFERENCE — DEED BOOK _____ AT PAGE

19) HAS A PERCOLATION TEST BEEN RUN? ____ YES ____ NO DATE RUN

20) PTR NUMBER (See Instructions) ____

The undersigned person hereby agrees that he has read the foregoing application and that the contents of same are true. It is understood that any permit applied for herein shall be void and of no effect if any of the above facts are not true.

June 23, 1975
DATE OF APPLICATION

OWNER Vice-President

FORM NO E-4-8-1-72

HEALTH DEPARTMENT'S COPY

Date Issued July 22, 1975

Serial No. 5147

IMPROVEMENTS PERMIT

LA No 9684

T C No 193-332-06

Map Date -

MECKLENBURG COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

TO THE BUILDING INSPECTION DEPARTMENT

APPROVAL OF LOT FOR INSTALLATION OF AN INDIVIDUAL SEPTIC TANK WITH SUBSURFACE, SOIL ABSORPTION, EFFLUENT DISCHARGE

NAME OF OWNER Klutts Realty & Construction Co., Inc.
(LAST / FIRST / MIDDLE)

ADDRESS OF OWNER 1433 Emrywood Drive, Charlotte, N. C. ZIP 28210

LOCATION OF LOT 2519 Matthews-Mint Hill Road
(STREET OR COUNTY ROAD)

SUBDIVISION Wood Hollow LOT NO 2 BLOCK NO 1

MAP BOOK NO _____ PAGE NO _____

The above specified lot is approved by the Mecklenburg County Health Department for the installation of an individual septic tank system with subsurface, soil absorption effluent discharge based on the percolation test results which yielded a percolation rate of 60Min./In on an on site inspection of the said lot, and upon the information supplied in the "Application for an Installation Construction, Alteration and/or Repair Permit" number 9684. This approval is subject to the following terms and conditions

1. That the nitrification field be installed, constructed, altered, and/or repaired in the same area where the percolation test was run
2. That an "Installation, Construction, Alteration and/or Repair Permit" be issued and in full force and effect when the system is installed, constructed, altred, and/or repaired and that the system be installed in accordance with same

This approval may be revoked and the building inspection department requested to revoke any building permit(s) which have been issued to authorize construction on the said lot if at any time it is determined that any information contained in the "Application for an Installation, Construction, Alteration, and/or Repair Permit" is not correct or is untrue or that the septic-tank system is not being installed, constructed, altered and/or repaired in accordance with a valid Installation, Construction, Alteration, and/or Repair Permit

A M Reynolds
Environmentalist

John R Atkinson
Director, Environmental Health Division or Authorized Section Head

FORM NO E-3-8-1-72

HEALTH DEPARTMENT'S COPY

Date Issued 19Sept75 **Serial No. 6857** ICAR(S) Permit No. 9684

T C No

Map Date

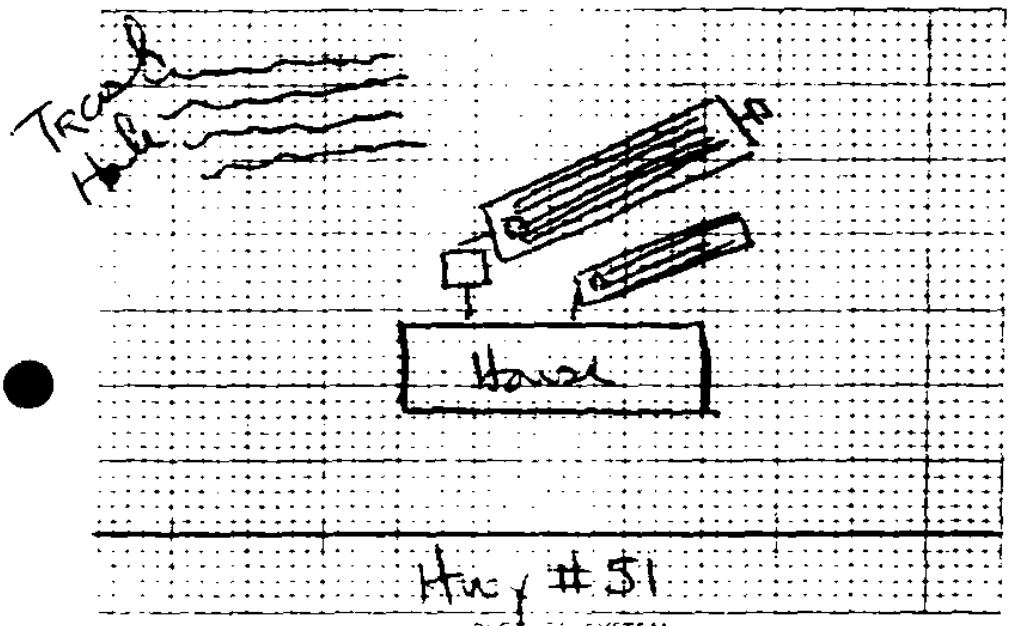
MECKLENBURG COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

INSTALLATION, CONSTUCTION, ALTERATION, AND/OR REPAIR PERMIT

(Individual Septic Tank System with Subsurface, Soil Absorption, Effluent Discharge)

Permission is hereby given to ✓ Install or Construct, ___ Alter or Repair the individual septic tank wastewater treatment system with subsurface soil absorption, effluent discharge as specified herein at the described location. This permit is granted based upon the information supplied in application 9684 dated 23June75 and this permit shall be void and of no effect if the information provided in the application is not true and correct. All work shall be completed on or before 19Oct75, after which date this permit shall be null and void.



PLOT OF SYSTEM

Percolation Rate 60

Liquid Capacity of Tank 1500 gal

Tank Construction Precast Concrete

Absorption and/or Notification Lines

Total Line Length 600' & 150

Number of Lines (6) 15' x 100'

Distance from House 10'

Distance from Property Line 10'

Distance from Well 100'

NAME OF OWNER Kilutts Realty

LOCATION OF PROPERTY 2519 Matthews - Mint Hill Rd

The system shall meet all of the construction requirements as set forth in the Regulations of the Mecklenburg County Board of Health which are in effect on the date of the granting of this permit. A certificate of approval must be issued by the Health Director before any system can be covered up or otherwise rendered uninspectable or can be used.

Comments: aeration pit 2½'x7'x4' stone
washer line 7½'x50'

R.M. Reynolds
Environmentalist

Division or Section Head

If this permit is for the installation or construction of a new system, it must be signed by the division or a section head of the Environmental Health Division in order to be valid. Only the signature of the Environmentalist is required where an existing system is being altered or repaired.

FORM NO E-5-4-2M-6-75

HEALTH DEPARTMENT COPY

Serial No. [illegible]

C of A (s) No. 9684

Date Issued 29Sep75

T C No

John Hopkinson

Map Date

CERTIFICATE OF COMPLETION

MECKLENBURG COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

CERTIFICATE OF APPROVAL

(Individual Septic Tank System with Subsurface, Soil Absorption, Effluent Discharge)

Name of Owner Klutts Realty (LAST / FIRST / MIDDLE)

Location of Property 2519 Matthews - Mint Hill Rd

Application Number 9684 Permit Number 9684

Inspection Data:

Liquid Capacity of Tank 1500 gal Tank Material Precast Concrete

Total Length of Drain Tile 600' & 150' Number of Lines (6) 15' x 100'

Depth of Filter Material 17" Cover Depth 36"

Water Supply Source well Distance from Water Source 100'

Excavation Inspected 26Sept75 (DATE) Tank Inspected 26Sept75 (DATE)

Nitrification Field Inspected 26Sept75 (DATE)

Washing Machine Line Inspected, If Applicable 26Sept75 (DATE)

The undersigned has inspected the Individual Septic Tank System with subsurface soil absorption, effluent discharge as described above and it has been ✓ installed or constructed, ___ altered in accordance with the permit issued and the regulations of the Mecklenburg County Board of Health in effect on the date of issuance of the permit. The issuance of this Certificate of Approval does not in any way guarantee that the system will operate properly or relieve any person now or hereafter owning, occupying or using such system from any liability resulting from the failure of the system to operate properly. This Certificate of Approval is issued subject to those restrictions and conditions shown on the permit and in addition to those listed below under comments. This Certificate of Approval shall be null and void if any information contained in the application is untrue or if any additions are made to the property which would increase the requirements for said system.

Comments: aeration pit O.K.

R. M. Reynolds
Environmentalist

FORM NO E-6-9-1-72

HEALTH DEPARTMENTS Co.